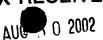
Page 2





	Upder the Paperwork Reduction Act of 1995, no persons	are required to respond to	collection of information un	lless if displays a valid OMB combol number.
ſ				Docket Number (Optional)
İ	PETITION FOR EXTENSION OF 1	IME UNDER 37	CFK 1,136(a)	BioCore 190
		In re Application of	Gorp.	
		Application Number	09/805,4	83 Filed 3-13-2001
		For Hydrug	& Br. Med	lical Articles
		Group Art Unit	15	Examiner Nola-Ba-on
	This is a request under the provisions of reply in the above identified application.			
	The requested extension and appropriate non-small-entity fee are as follows (check time period desired):			
	One month (37 CFR 1.17(a)(1))			\$ 110.00
	Two months (37 CFR 1.17(a)(2))			<b>\$</b>
	Three months (37 CFR 1.17(a)(3)) \$			\$
	Four months (37 CFR 1.17(a)(4))			\$
	Five months (37 CFR 1.17(a)(5))			
	Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown			
	above is reduced by one-half, and the resulting fee is: \$			
۸	A check in the amount of the fee is enclosed.			
Adjustment 09/09/2002	PHAYSO TORROTORY TO A CAROL POTAL PTO - 2036 IS ALIACTION.			
01 FC:115	The Commissingenthes already been authorized to charge fees in this application to a Deposit Account.			
	The Commissioner is hereby authorized to charge any fees which may be required,			
	or credit any overpayment, to Deposit Account Number			
	I have enclosed a duplicate copy of this sheet.			
	I am the applicant/inventor			
	assignce of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).			
	attorney or agent of record.			
	attorney or agent under 37 CFR 1.34(a).  Registration number if acting under 37 CFR 1.34(a).			
00 FC: WARNING: Information on this form may become public. Credit card information should not				
09/09/2002	002 MMAY22 be))ந்துக்கு இதைந்தித்த form. Provide credit card Information and authorization on PTO-2038.			
01 FC:115	august 2 200 Z		Coll	a A
	Date		Signa	ature
	10 0		(allen	1番・リケーク
	0.0		Туре	d orarinted name
	NOTE: Signatures of all the inventors assignees of record of the entire interest or their representative(5) are required. Submit multiple			
	forms if more than one signature is resided, see b	elow.		
	Total offorms & Saubmitter			3
	Burdon Hour Statement: This form is estimated & take 0.1 the amount of time you are required to complete this form	should be soul to the Chief	Information Officer, U.S. P.	ent and Trademark Office, Washington, Di
	20231, DO NOT SEND FEES OR COMPLETED FORMS TO	THIS ADDRESS, SEND TO	); Assistant Commissioner to	BPatents, Washington, DC 20231.
•	ို့ရ			n.

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